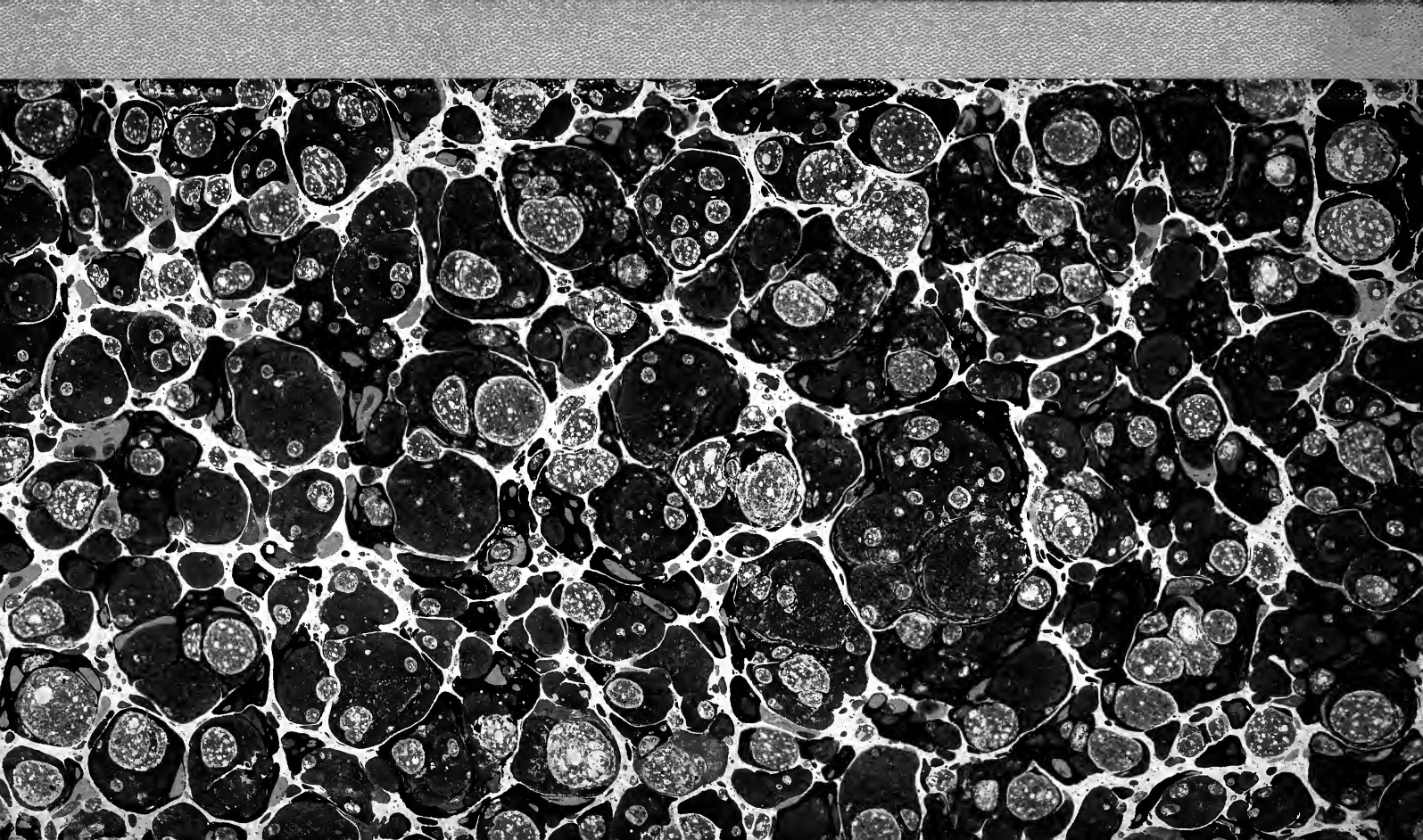

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STATEMENT

OF THE

GRIEVANCES

OF THE

POOR LAW MEDICAL OFFICERS,

WITH REMARKS ON

SANITARY MEASURES AND VACCINATION,

ADDRESSED TO

The Right-Hon. Viscount Palmerston, K.G., G.C.B.

5793.10

BY

RICHARD GRIFFIN,

CHAIRMAN OF THE

POOR LAW MEDICAL REFORM ASSOCIATION.

WEYMOUTH:

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12, Royal Terrace, Weymouth,
December 22nd, 1856.

My Lord,

To you, as the Premier of this kingdom, I most respectfully address the accompanying statement. There is at this moment a general feeling throughout the country, that measures of vast importance will be brought forward by Her Majesty's Ministers during the next Session of Parliament,—amongst these, the Sanitary state of the people, Vaccination, and the more adequate remuneration of the Poor Law Medical Officers, it is hoped, will hold a prominent position; I therefore venture to lay before your Lordship the subjoined remarks, which I feel sure will meet with your serious and patient consideration.

The claims of the Poor Law Medical Officers, upwards of 3,000 in number, for an equitable adjustment of their salaries are of far greater importance than they may superficially appear, and ought not to be lightly treated, as they, in reality, involve the well-being of at least 4,000,000 of Her Majesty's subjects, who compose the labouring classes. Innumerable appeals have been made to the Boards of Guardians and Poor Law Board to redress the grievances of their Medical Officers, but without avail; it is therefore to the Legislature only they can now look for justice, which they trust will not be denied them.

To prevent the necessity of quoting repeatedly the source of the information which I deem requisite to lay before your Lordship in support of my statement, I will here mention, that whenever numbers are prefixed to the head of a paragraph, they denote evidence laid before the Select Committee of the House of Commons on Medical Relief, in May, 1854.

Believing the accompanying remarks, if made public, may in some degree assist Her Majesty's Government in carrying out measures for the improvement of the Sanitary condition of the people, I intend to publish and transmit a copy to each Member of Parliament. With many apologies for trespassing so long upon your Lordship's valuable time,

I have the honor to be,

My Lord,

Your Lordship's obedient servant,

RICHARD GRIFFIN,

Chairman of the Poor Law Medical Reform Association.

The Right Hon.
Viscount Palmerston, K.G., G.C.B.

POOR LAW MEDICAL REFORM ASSOCIATION.

In May, 1856, the Poor Law Medical Officers of England and Wales held a Meeting in London, over which the

Right Hon. the Earl of Shaftesbury presided.

At this Meeting there were assembled, from all parts of the kingdom, upwards of 200 Medical Men, who prepared a Petition to the House of Commons, and a Memorial to the Poor Law Board, both of which were numerously signed, and presented to their respective destinations; and during the Session, nearly 260 Petitions and Memorials from the Officers of as many Unions were likewise presented. These Petitions and Memorials embodied certain requests, founded upon Resolutions of the Select Committee of the House of Commons on Medical Relief, which sat in 1854. Of these Resolutions, it will be necessary, in the first instance, to consider

No. 4.—"They also recommend that the Poor Law Board should direct their attention to the Salaries of the Medical Officers, which in some cases appear to be inadequate to the duties they are required to perform."

This Resolution the Medical Officers regret to say has not been complied with by the Poor Law Board, they therefore pray that the Legislature will direct it to be carried out, and they respectfully submit that it may be done in the following manner.

First,—"That a uniform scale of payment should be adopted throughout the entire kingdom."

In order to ascertain the exact amount of the payments, Questions were issued to the Poor Law Medical Officers, and from 500 answers already received, it will be seen that neither the Poor Law Board nor the Boards of Guardians have acted on any rule in fixing the salaries, as they vary from 3*d.* to £1. 16*s.* 8*d.* per case. In the Weymouth Union, where I am a Medical Officer, it is from 1*s.* 2¼*d.* to 14*s.* per case, the Paupers on an average being equally distant from the Medical Officer's residence; in many other Unions a similar disparity exists. From the annexed Summary will be seen the great variation of the salaries, those under 1*s.* being as low as 10*d.*, 9*d.*, 7*d.*, 5*d.*, 4*d.*, and 3*d.* per case.

		s.	*d.*		£	*s.*	*d.*
28	Medical Officers receive between ...	0	3	and	0	1	0
35	... ...	1	0	.....	0	1	6
48	... ...	1	6	.....	0	2	0
69	... ...	2	0	.....	0	2	6
71	... ...	2	6	.....	0	3	0
55	... ...	3	0	.....	0	3	6
49	... ...	3	6	.....	0	4	0
32	... ...	4	0	.....	0	4	6
24	... ...	4	6	.....	0	5	0
14	... ...	5	0	.....	0	5	6
10	... ...	5	6	.....	0	6	0
10	... ...	6	0	.....	0	6	6
7	... ...	6	6	.....	0	7	0
12	... ...	7	0	.....	0	8	0
10	... ...	8	0	.....	0	9	0
8	... ...	9	0	.....	0	10	0
3	... ...	10	0	.....	0	11	0
2	... ...	11	0	.....	0	12	0
3	... ...	12	0	.....	0	13	0
4	... ...	13	0	.....	0	14	0
2	... ...	14	0	.....	0	15	0
1	... ...	15	0	.....	0	16	0
1	... ...	16	0	.....	0	17	0
1	... ...	17	0	.....	0	18	0
1	... ...	...		...	1	16	8

500

These figures prove incontestibly the absolute necessity of Parliament laying down a uniform and equitable scale of payment, and thereby removing the responsibility from the Poor Law Board and the Boards of Guardians, both of whom have clearly proved their utter incapability of dealing rightly in an affair of such importance to the poor, as well as to the Medical Officer.

No. 12. (*R. B. Cane, Esq.*)—"The Boards of Guardians in the first instance, fix that salary, subject to the approbation of the Poor Law Board, and when that salary is approved of by the Poor Law Board, is it in the power of the Board of Guardians to alter that without leave? The Law has confided in the Poor Law Board the absolute power of fixing the amount of salary irrespectively of the Board of Guardians, and if they please, they can exercise that authority without reference to the Guardians; but the general mode is to consult the Guardians, to enquire what they deem to be a proper salary, and having considered their answer, and their views, then to determine what shall be the salary assigned to the office."

No. 2688. (*G. Wallis, Esq., M.D.*)—"At the present moment there is no principle operating upon which they are to calculate the amount of payment, it is a mere arbitrary arrangement between the parties."

The Poor Law Medical Officers in their second request pray—

"*That a fixed salary, founded on the average number of cases attended during the last three years be adopted, the sum to be calculated at not less than 5s. per case, with at least 1s. extra for each mile the patient resides from the Medical Officer's house.*"

This request must be deemed extremely moderate when it is taken into consideration, that from the returns already received, the duration of sickness averages 28 days and one hour.

No. 985. (*R. Kettle, Esq.*)—"South Staffordshire General Hospital average duration of illness, a fraction less than 30 days."

"Birmingham a fraction less than 28 days."

Of the 500 returns already calculated, the average by salary is 2*s.* 3*d.* per case, extras, 6¾*d.* or 2*s.* 9¾*d.* on the whole.

No. 166. *Mr. Cane*, of the Poor Law Board, says—"My impression is that, taking the whole kingdom together, the payment per case to a Medical Officer would not average more than 3*s.*"

In the 500 returns, those for attendance on the Union Houses are excluded, hence the majority are for country districts, which fully prove that the payments are totally inadequate to the expenses incurred, omitting altogether any remuneration for professional skill, &c. The nature of the outlay I will now explain, and commence with the item of drugs, the cost of which it is difficult for a Medical Officer to estimate, as they are taken from a general stock for Union and private practice, but in public institutions the information may be easily obtained:—

	s.	*d.*
In the Leominster Union it is per case	1	0¾
Hertford Dispensary	2	7
Township of Leeds	1	4
Plymouth Dispensary	1	4¼
Dispensary at Leeds, supported by Charity	1	5¼
Exeter Dispensary	1	11¼
Burton upon Trent	1	10¼
North Staffordshire	1	3
Atherstone	1	0
Cheshire	1	1¾
Carlisle	1	6

No. 986. (*R. Kettle, Esq.*)—"Cost of each out-patient in the South Staffordshire General Hospital, 2*s.* 11¾*d.*"

No. 169. (*R. B. Cane, Esq.*)—"I think there is a statement that the average expense of drugs alone in the principal Hospitals in London, exceeded 2*s.* 6*d.* per case."

No. 3269. (*C. J. F. Lord, Esq.*)—"Whereas the average cost of drugs alone, for a single case, required in the practice of Surgeons at Dispensaries, where they relieve the same class of persons as the Medical Officers of Unions, amounts to 2*s.* 1½*d.*, and in Hospitals to 4*s.* 4½*d.*"

"In the Great Yarmouth Hospital it is 3*s.* 8*d.*"

The estimate may, therefore, fairly be set at not less than 1*s.* 6*d.* per case for drugs. Though I am aware it is done at a lower rate in a few places, but the poor are to be pitied, who are compelled to take those cheap and inert materials. Other items, however, are to be taken into calculation, as it is unfair to expect that Medical Men should find, gratuitously, for the use of the nation, a surgery, dispenser, or have the labour of mixing the medicines themselves, fire, candles, or gas, general wear and tear, besides the annoyance of a host of paupers sending at all times of the day to the house for medicines, (very few come themselves for advice, but take good care to compel the Surgeon to visit them.) To estimate the value of these items, it is necessary again to look at the cost of dispensaries throughout the country, as they are generally managed most economically, and approximate more nearly to Union practice than any other Institutions. In a report of the medical charities of the metropolis, by Dr. Guy, (See *Athenæum*, December 27th, 1856,) it is stated there are sixty Dispensaries in the metropolis, where are relieved 232,878 patients annually, at an expense of £29,064, or 2*s.* 5¾*d.* each case. We thus arrive at the cost of medicines, surgery, dispenser, &c., on an extensive scale; an amount, which is only one farthing less than I propose should be allowed the Poor Law Medical Officers. A large proportion of these dispensary cases are no doubt trivial, and orders for them would be refused by a Relieving Officer; in addition, few of these patients are visited at their own homes, which is the reverse in Union practice. They therefore do not entirely afford a true criterion of the services performed by the Poor Law Medical Officer. In country towns, however, the same facilities of admission do not exist, and the sick are compelled to obtain tickets, which are principally given in severe cases of illness, hence the expenditure in these institutions is greater than those in London; but at the same time they approach more closely to Union practice, where orders are also requisite.

	s.	*d.*
Reading Dispensary	6	5
Bury	8	4½
Spalding	7	11½
Leeds	4	5
Ludlow	7	4½

No. 2035. (*R. W. Rumsey, Esq.*)—"The average expense of the Gloucester Dispensary for ten years was about 5*s.* 6*d.* per case, including all expenses."

As the services of the Prescribing Medical Officers in Dispensaries *are gratuitous*, we get at the lowest cost per case for the use of a Surgery, Coals, Candles, Dispensing, &c.

From the foregoing figures, I propose to take 1*s.* 6*d.* as the cost of drugs, and 1*s.* only for the use of Surgery, compounding, and dispensing the medicines, &c. &c. for the Union patient, and to charge the other 4*s.* 6*d.* to the private practice where there is any, and where there is not, to the pocket of the wretched individual who has the guardians only to reward him. The next items to be taken into consideration are professional skill, (the

attainment of which has cost on an average little less then £1000,) bodily fatigue and mental anxiety. These I presume have hitherto been regarded as above price, assuredly no price has been paid for them, but is this just? can it be permitted to continue? I unhesitatingly declare the system of payment to the medical officer is cruel in the extreme; it is a system that is based either on the robbery of the Medical Officers or of the poor; in either case it is a stigma on the nation that countenances it now that its abuses are clearly pointed out. How has it acted hitherto? the majority of the Medical Officers are high-principled men, and have faithfully discharged their duties to the poor, giving them Quinine, Cod Liver Oil, Sarsaparilla, Leeches, &c., when required, which their niggardly salaries never paid for, they have therefore literally relieved them out of their own pockets. Others there are, who have not the private means to purchase these expensive drugs, the result of which is that Hospitals and Dispensaries are crowded with supplicants for relief, and the ratepayers burdened with the support of their families, which would not be the case, if a fair remuneration were made to the Medical Officer. To obviate this discreditable state of matters, I propose that each Medical Officer shall receive for professional skill, bodily toil, and mental anxiety, 2*s.* 6*d.* each case, a small sum when it is considered that the duration of illness averages upwards of one month, and that in my own case I have paid on an average ten visits to each patient, a fair sample of the whole.

The payments will stand thus:—	*s.*	*d.*
Drugs per case	1	6
Use of Surgery, Dispensing Medicine, &c.	1	0
Professional advice and visits	2	6
	5	0

In country districts an additional allowance should be made for the cost of a horse, gig, and man servant, which are imperatively necessary—these at the lowest computation, one year with the other, amount to £87 6*s.*, as the following items shew:—

	£	*s.*	*d.*
Annual deterioration of horse from injuries, ill health, age, or death	10	0	0
Food	30	0	0
Shoeing and Clipping or singeing in winter	2	10	0
Man Servant, wages, food and tax	25	0	0
Gig repairs and replacing	10	0	0
Duty on horse and gig	1	16	0
Harness, repairing and replacing	3	0	0
Stable	5	0	0
	£87	6	0

My own expenses for the above, average about £100 per annum. It may be urged that a gig need not be kept, but it is impossible for a Medical Man always to ride, the fatigue is too great, and a horse continually at work gets weak in the knees, which renders him unsafe, and a Union Medical Officer cannot afford to be frequently changing. Some may say the same horse, &c., will do for private as well as Union practice, but it must be borne in mind that a young Surgeon taking the appointment, will for the first few years have little, if any, private practice, and in many instances the Union duty is the entire work of one horse, nay, sometimes of two; but even if it be used for the private patients, which are few compared with the paupers, it must be recollected the country Surgeon has no other compensation beyond that allowed the Medical Man resident in a town, though he has to endure great loss of time in travelling immense distances, and has to undergo an enormous amount of mental and bodily fatigue, out at all hours and in all weather, exposed to the pitiless storm, frequently drenched to the skin, and passing the greater part of

many a night in some wretched hovel. No marvel that his days are shortened, and the average duration of his life is less than in any other profession; and that, thus prematurely cut off, he too frequently leaves his wife and children penniless, and supplicants for relief from that noble institution the Royal Benevolent College.

"The Surgeon of the Sherborne Union, who has just resigned, (*Lancet*, Dec. 13th, 1856,) had travelled during one year, 3,111 miles, and that in nine years two horses were worn out in the work; that for this travel and time, to say nothing of drugs, (the consumption of which is at times frightful,) the salary is £63 a year besides extras —a wonderful matter truly—some £25 or £30 a year, for amputations, fractures, labours, swelling up to a total so tempting, that if any 'young man,' (to whom one of the Guardians thought it would only prove a *little pleasant riding*) is disposed to try it, he may rest assured a very few years of such work will go far towards making an old one of him."

The foregoing conclusively proves the absolute necessity of an allowance being made for a horse, &c., and I know of no way so fair as that proposed in the Petition of the Union Medical Officers, that a mileage be paid of not less than one shilling per mile for each case the first four miles, and after that two shillings per mile, thus, if a Medical Officer live three miles from his patient's residence, he will be paid as follows (the average distance in 250 returns is 3 miles.)

	s.	*d.*
For Drugs per case	1	6
Use of Surgery, Dispensing, &c.	1	0
Professional advice and visits	2	6
Journey to be paid only once during an illness ...	3	0
	8	0

As an example of mileage, awarded by the Legislature to an Officer who has neither mental anxiety nor night work to trouble him in its performance, who is not required to keep a horse, as the summons may be served at his leisure by any inferior person employed by him, I will quote the schedule for the renumeration of a High Bailiff, by which it will be seen, he is paid 1*s.* 3*d.* for going three miles, whilst the Poor Law Medical Officer asks only 3*s.* for travelling thirty miles, the average distance of his patients' residence being three miles, and the number of his visits ten.

Schedule for the remuneration of High Bailiffs.

Maximum Salary £600, and in large districts £100 will be added in the shape of Responsibility-money.

An allowance for mileage on the service of Summons.

	s.	*d.*	TOTAL FOR MILEAGE.	*s.*	*d.*
Within 1 mile ...	0	4	.....	0	4
2 miles ...	0	5	Extra	0	9
3 " ...	0	6	.....	1	3
4 " ...	0	7	.....	1	10
5 " ...	0	8	.....	2	6
6 " ...	0	9	.....	3	3
7 " ...	0	10	.....	4	1
8 " ...	0	11	.....	5	0
9 " ...	1	0	.....	6	0
and	1	0	per mile for every mile above that distance.		

For Executions and Commitments

Under £5	2	6
£5 and under £10	5	0
£10 and upwards	10	0

and double the above mileage upon all.

The mode of payment by mileage would contribute materially to the benefit of the poor, as Guardians would take care to reduce the districts as much as possible in order to save expense, and the poor would not then have to travel enormous distances for their medicine; which many now have to do, some of them going so far for that purpose as twenty miles, out and home. There need be no difficulty in regard to the calculation of the mileage, if a rule be laid down that all cases shall be reckoned from a central populous part of each village. If a mileage be not adopted, it will be necessary to pay the Medical Officers a fixed allowance for a horse, or an increased sum per case, as an equivalent. In order to estimate the cost for a horse, &c. at per case, we must ascertain the exact amount of salaries paid in any one year, and as 1854 is the last that is publicly recorded, I will take that as my guide; it gives the 3,200 Union Medical Officers £230,777 amongst them, or an average of £72 2 4½ each, if this be divided by 2*s.* 9¾*d.*, the amount now paid per case, according to the 500 returns calculated, it will give to each Medical Officer an average of 512 cases to attend in the year. If the horse expenses £87 6*s.* be divided by these figures, we shall have 3*s.* 4¾*d.* as the cost of each case, which ought to be added to the drugs, surgery expenses, and professional advice, making in the whole 8*s.* 4¾*d.* for every case attended by the Country Surgeon. It must not however be supposed that a Medical Man enjoys the full benefit of the average payment of the £72 2 4½., after the deductions for drugs, &c., as he has in some instances to pay 2*s.* weekly for the conveyance of the book to the Board, and all have to pay Income Tax, Assessed Taxes, and Tolls, which ought to be abrogated in the case of the Union Medical Officers; the last item costing, in some instances, as much as £5 annually. The Clergyman goes free of toll to administer to the spiritual welfare of the Poor, and why not the Union Surgeon who attends to their bodily ailments?

In all large towns it is desirable that the Guardians should have the option of finding a Dispensary, Dispenser and Medicines for the poor, and of employing the Medical Officers purely in the capacity of Physicians and Surgeons, in which case the drugs should be found by the Poor Law Board for the respective Unions; if this be not done, the tendency of the Guardians will be to procure them by contract of the retail druggists of the place, on the principle that as they are rate-payers, they ought to have the privilege of supplying them. I need scarcely add, this should not be permitted, as on the purity of a drug may depend the life of many a poor man. An impurity is difficult to detect, hence the necessity of procuring medicines at first-rate wholesale houses, and not tendering for them at all. In country districts and small towns, the present plan of the Medical Officer supplying the medicine is the only one practicable; Leeches and Cod Liver Oil ought, however, to be extras, and found by the Guardians, otherwise, from their great expense, the poor will never reap any real benefit from them.

No. 140. (*R. B. Cane, Esq.*)—"I believe it is found advantageous that the drugs should be supplied by the Guardians, in certain Unions, where they can be readily obtained by the poor. I assume that it is advantageous, because where the Guardians have adopted that arrangement they generally adhere to it. I do not remember an instance where a Board of Guardians, having agreed to provide drugs, have abandoned it after a trial."

No. 142. (*R. B. Cane, Esq.*)—"In a Union, where the population is widely scattered, it would be necessary not only to provide drugs, but a house and dispenser, which would occasion considerable expense, and is the chief obstacle to its being carried out."

No. 2051. (*H. W. Rumsey, Esq,*)—"I think that in towns of a certain population, the medicines should not be provided by the Medical Officers, but in remote rural districts, the present system, with some modification, must be continued."

No. 471. (*R. Weale, Esq.*)—"I think, upon the whole, balancing the advantages and disadvantages, it is better that the Medical Man should find the drugs, than that the Boards of Guardians should do so."

No. 693. (*J. F. Gilbert, Esq.*)—"I consider the system of finding drugs, and paying the Medical Officer's salary, has many advantages."

No. 694. (*J. F. Gilbert, Esq.*)—"Our drugs are better, because as a Corporation we are able to deal with some of the first houses in the kingdom, and get the best of drugs."

The system tried in many places, and still carried out in a few, of having only one Medical Officer to a Union, is fraught with much mischief to the poor, as it is utterly impossible for any one man to do the duty required of him. The mass of the evidence laid before the Select Committee of the House of Commons, is to the effect that the districts should be lessened as much as possible, and the number of the Medical Officers increased.

No. 1630. (*Dr. J. Griffin.*)—"I think the poor have a great deal too far to send for medical attendance; very frequently the districts are too large, and not sufficiently supplied with Medical Men for the interests of the poor."

Much surprise has been expressed that Medical Men should retain their appointments, if they are really so worthless as represented; or, that when vacancies occur, there is no difficulty in finding candidates for the office? The answer is simple. Resignations are continually taking place; out of the 500 returns examined, 209 Medical Officers have held their appointment less than 6 years; 114, less than 4 years; 68, less than 2 years; and 32, less than 1 year. Do not these figures speak volumes? Some there are who retain their appointments at a dead loss, for the sole purpose of keeping a rival out of the district where their private practice is situated; but is it to be expected, under such circumstances, the duty is performed with that alacrity and cheerfulness it would be, were a fair compensation made?

No. 1545. (*Rev. C. Oxenden.*)—"Medical Men must take these offices to save their other practice."

When vacancies occur, I admit there are applicants for the offices, and in most cases, they are young men who have just passed their examinations; they try it for two or three years, and finding themselves out of pocket by it, resign in disgust; almost the only instance in which they are retained, is when a private practice is purchased by them in the same locality. Is it wise for a Government to sanction this constant mutation? Is it well, that as soon as a man has gained experience at the expense of the poor, he should be compelled to resign for want of a fair compensation; and that another, it may be of the inexperienced, be encouraged to accept his appointment, which, if he does his duty to the poor, must ultimately impoverish him? The Poor Law Commissioners have themselves acknowledged the injustice of this paltry payment, by their recommendation for the relief of permanent poor (Arts. 75 and 76 in the Consolidated Order), which states that "the Medical Officer should receive 6*s.* or 6*s.* 6*d.* per case in the rural districts, and the remuneration per case for those not on the pauper list may reasonably be on a somewhat higher scale; but the Board are inclined to think that it will not be found necessary to exceed 10*s.* per case." This recommendation, though made in 1839, and repeated in 1841, has not been acted on; it has been left to the Guardians, to carry out or not, as they pleased; and the result is known. The Poor Law Board may endeavour to shelter itself under the plea that the order has been issued; but that is not enough; it ought to have been enforced long ere this, backed as it was by the expressed opinion of the House of Commons in 1854." (See page 4, No. 4.)

The Poor Law Board, if report speaks true, has admitted the payment to be inadequate to our services, but adds, whenever a vacancy occurs there are plenty of applicants for the office, and therefore it feels a difficulty in adding to the Poor Rates, by augmenting our salaries. This argument, however specious, I contend is not a fair one: our profession,

like all others, is overstocked, hence men are anxious to take any appointment they hope may lead to something better; but this is no reason why places of trust should be reduced to the lowest possible minimum; *and ours is a place of trust*, since the lives of millions of the poorer classes are committed to our charge. Were the Poor Law Board itself thrown open to public competition there would be plenty of candidates to supply the place of the officers, at half or even a quarter of their present salaries, but that does not prove it would be right to underpay them, as the Union Medical Officers now are. Let the duties of every office be ascertained, a fair remuneration fixed, and as vacancies occur, the best men chosen to fill them.

No. 1275 and 1276. (*M. B. Garrett, Esq.*)—"It was some years ago when I took the medical appointment, and a drowning man will catch at a straw; when young men commence practice, they are very glad of these appointments." "I thought it would be the means of bringing me into more general notice, and giving me more experience, and therefore, it was worth while to take it. My ideas of it are very much changed.'

No. 2689. (*G. Wallis, Esq. M.D.*)—"There are a great many districts which are so wide, that they would require special arrangement, but that could be easily adopted, because, I believe the expense would not be more than was reasonable and proper."

No. 1657. (*Dr. J. Griffin.*)—"A man is now paid not for what he does, but for what he is expected to do, supposing the Medical Officer is not a conscientious man, but suppose Medical Men were paid per case, their object would be to show the greatest attention possible to the poor."

No. 2058. (*R. W. Rumsey, Esq.*)—"I am sure, the present rate of payment of Medical Officers, without coming upon their own resources, is quite inadequate."

No. 2059. (*R. W. Rumsey, Esq.*)—"The consequence is, when expensive drugs are required, that either the Medical Officer must provide them at his own expense, or if he does not do that they could not be provided at all, or he will perhaps send them to the Medical Charities, the Infirmary, or the Dispensary, or he will induce them to enter a medical club, in fact, he will endeavour to shift the burden from his own shoulders."

No. 2060. (*R. W. Rumsey, Esq.*)—"Which I conceive to be very detrimental indeed to the poor, to be handed about from one source to another, when their diseases require prompt and immediate treatment."

No. 2242. (*J. Leigh, Esq.*)—"In some types of disease, I feel quite sure when Quinine is necessary to be prescribed in large quantities, it could not be furnished without serious loss to the Medical Officer at the sums of money now paid to him."

No. 1734. (*Dr. J. Griffin.*)—"If you can make the duty and the interest of the Medical Men combine, you will get a more efficient attendance on the poor than you now do."

No. 1874. (*Rev. E. J. Howman.*)—"I think the present system works badly for all parties; the Guardians are discontented, the Medical Officers are discontented, and the poor are discontented, because it opens the door to a multiplicity of evil, which, while it exists, I do not believe can be corrected; the system of payment by salary tempts the Board to get as much out of their Medical Officers as they can for a smaller payment; it tempts the Medical Officers to do as little as they can for their payment, and it tempts the poor to throw as much as they possibly can upon the Medical Officers, from the feeling that the Parish pays for them, so that they are inclined to make themselves paupers for the sake of medical relief."

No. 1992. (*Rev. E. J. Howman.*)—"I do not believe that £300 a year, which might be a remuneration in 1837, when the population was only 16,000, can be remunerative in 1854, when the population is 21,000; I think it works ill for all parties; I think it works unfairly against the Medical Man, and I think it works badly as regards the wants of the poor."

No. 1994. (*Rev. E. J. Howman.*)—"We have now recently got two new Medical Officers, young men, who of course cannot afford, as the old practitioners do, to find themselves not in pocket, if they are not out of pocket by their practice."

No. 2000. (*Rev. E. J. Howman.*)—"I hear the Medical Officers all grumbling about being very much under-paid."

No. 2960. (*W. Taylor, Esq.*)—"I think it is the opinion of the majority of the Guardians that the Medical Officers are underpaid."

No. 2962. (*W. Taylor, Esq.*)—"If the Poor Law Board gave an order for an increase of the salaries, I do not think it would be objected to."

No. 377. (*R. Weale, Esq.*)—"I stated the attendance of Medical Men on clubs is inferior to that given to the poor."

No. 499. (*R. Weale, Esq.*)—"Improvements have been made in Medical Relief since 1848; time has done a great deal towards improving, and it is a continually improving system."

The Poor Law Medical Officers in their eighth request pray—

"*That the Poor Law Board be requested to define the class of persons entitled to Medical relief, and that it be not left to the discretion of the Relieving Officer, Overseer, or Churchwarden.*"

Should a per case payment be adopted, in the form of a fixed salary, founded on the number of the cases attended in the previous year, or on an average of three years, which I think is preferable to a per case payment solely, it will be necessary to define the class of persons entitled to medical relief, otherwise the poor will be great sufferers. Experience, and the evidence laid before the Select Committee of the House of Commons, prove that where the Medical Officers are paid per case solely, orders in the early stages of disease, when it is most easily curable, are continually refused; because, if liberally given, the Relieving Officer gets into disgrace with the Guardians; thus, many a poor labouring man has been denied an order, whose earnings would not admit of him paying a medical charge, and the same system will be continued, in order to keep down the rates, unless a distinct line be drawn, and the present discretionary powers of the Relieving Officer removed. In a fixed salary the reverse system exists, and the Medical Man is inundated with orders, many of which, it was originally never contemplated he should have, as formerly he was required to attend paupers only, the labouring classes having their clubs; these have, however, gradually fallen off, and the Guardians, with wonderful liberality —it being entirely at the expense of the surgeon—have given them orders for medical assistance, and by this means have increased his labour four-fold, the paupers being less than a million, whilst the working classes are four millions. Half of these, it is computed, required medical aid annually, and no doubt ought to be relieved at the cost of the State; but such order for relief should not be left to the judgment or caprice of a relieving officer to give or withhold. Let medical orders be granted to every person above the age of 16 whose income from all sources does not exceed 10*s.* per week, and to every husband and wife with their children under 16 years of age, whose united income does not exceed 15*s.* per week, and let them have the power of obtaining a medical order from the Relieving Officer, Clergyman, Magistrate, Overseer, or Churchwarden of the Parish in which they reside. Let it be the duty of the Guardians to investigate these orders every board-day, and if it should appear the parties are not legally entitled to them to strike their names off the list. Let the Medical Officer receive 2*s.* 6*d.* each case, for the services already rendered, with half the amount of mileage, and all the extras to which he may be entitled, the Guardians having the power to reimburse themselves by suing the party in the County Court.

No. 2624. (*G. Wallis, Esq., M. D.*)—"The number of paupers made paupers through sickness, constitutes 72 per cent. of all those made paupers through all causes."

No. 2740. (*G. Wallis, Esq., M.D.*)—"The 72 per cent. is not a matter of opinion, but matter of fact."

No. 2613. (*J. Ellison, Esq.*)—" In the per case payment, there is every inducement on the part of the Relieving Officer, to deal out medical orders with a niggardly hand, in order to keep down the pressure upon the rates, whilst at a fixed salary, the inducement is just the contrary."

No.485. (*R. Weale, Esq.*)—"In the payment per case, Boards of Guardians frequently complain of multiplication of cases by Medical Officers, that occasion angry feeling between Medical Officers and Boards of Guardians." (This cannot exist if orders be given.)

No. 1618. (*Rev. C. Kingsley.*)—" I do not suppose that Guardians are '*hostes humani generis*' any more than other men; my feeling is, that wheresoever you give a half-educated man, as the mass of rural Guardians are, considerable power, and that power bearing directly upon his own interest, you must expect that he will use it in a harsh and interested way, unless some one more educated calls out the good which is in every man."

No. 160. (*R. B. Cane, Esq.*)—" The Poor Law Board recommend a fixed annual salary should be allowed for the infirm placed upon permanent Pauper list, and cases not on that list, paid for by per case payment."

No. 167. (*R. B. Cane, Esq.*)—" The Poor Law Board did not recommend a per case payment should be adopted without reference to any other payment, it was to be combined with a salary for attending such poor persons as are permanently sick and disabled, and that a higher rate ought to be allowed for other cases which would require closer attention, medicine, and visits, than those merely suffering from age and bodily infirmity, in a chronic state."

No. 165 and 205. (*R. B. Cane, Esq.*)—" I believe that the calculation of 6*s.* per case, by the Poor Law Board, did appear for some considerable period previously to the issue of the regulations providing fees for attendance upon surgical cases."

No. 84. (*R. B. Cane, Esq.*)—" The Poor Law Board are able to lay down no rule as to the amount of a man's wages entitling him to medical relief; the decision rests absolutely with Guardians."

No. 663. (*R. Boyd, Esq., M.D.*)—" I calculate a poor man will have to pay 3*s.* a month for medicine, at the cost price."

No. 2053. (*H. W. Rumsey, Esq.*)—" I would supply no connection between out-door relief and pauperism; I would certainly not place a dispensary in the Union-house or Work-house."

No. 2134. (*H. W. Rumsey, Esq.*)—" There should be no civil disability, and no disgrace attaching to the receipt of medical aid, that the medicine should be supplied separately, that there should be no impediment whatever to the application to the Medical Officer."

No. 622. (*R. Boyd, Esq., M.D.*)—" I think that if medical relief had been given to the independent labourers more profusely than it was, it would have kept many from becoming eventually paupers."

No. 634. (*R. Boyd, Esq. M.D.*)—" I believe that the labouring classes cannot afford to pay for medical attendance; an exception may occur, now and then, but we must talk of the poor as we find them—and as a rule they cannot; it is true, they do attempt it, run into debt, lose their independence and self-respect, and become dependent parish paupers, if nothing worse."

No. 1023. (*Mr. G. Chick.*)—" A labouring man, with 10*s.* a-week, could not find medical relief."

No. 1029. (*Mr. G. Chick.*)—" I am decidedly of opinion that if Medical Relief were more freely given there would be less pauperism."

No. 1030. (*Mr. G. Chick.*)—" Medical relief should be given in the onset of the illness."

No. 1246. (*M. B. Garrett, Esq.*)—"I think the system of medical relief altogether deficient. I find there are great impediments in the way of obtaining orders for relief."

No. 1347. (*M. B. Garrett, Esq.*)—"I felt as an Medical Officer that I could not do justice or my duty to the poor, in consequence of the opposition I met with from the Relieving Officer."

No. 1380. (*Rev. C. Oxenden.*)—"Pauperism is very largely increased by the want of prompt medical aid."

No. 1389. (*Rev. C. Oxenden.*)—"The importance of giving to every labourer, every working man, an opportunity of receiving medical advice without any expence on his part, is of the first consideration; because the absence of medical attendance at the very time when it is most needed, frequently results in the individual becoming for a lengthened period ill, and, consequently, a burden upon the parish, or if it terminate fatally, then his family becomes a still more serious burden."

No. 1390. (*Rev. C. Oxenden.*)—"I should extend to all the working classes gratuitous medical relief up to 25*s.*, a week, inclusive of the whole earnings of the family, also single persons not earning more than 10*s.* per week."

No. 1392. (*Rev. C. Oxenden.*)—"I think it most important to extend the system of medical relief beyond the mere poor, so as to prevent persons from becoming poor; the Doctor's bill is the bill which breaks down the labouring man."

No. 2076. (*H. W. Rumsey, Esq.*)—"A man with 14*s.* a week, with a family, would be quite unable to find himself medical relief, worth calling such."

No. 2089. (*H. W. Rumsey, Esq.*)—"There is no civil disability attaching to the receipt of medical relief in Belgium."

No. 2090.) *H. W. Rumsey, Esq.*)—"And that should be adopted in this country."

No. 2186. (*H. W. Rumsey, Esq.*)—"The poor object to apply to the Relieving Officer for medical relief, on the ground of the disgrace, also the difficulty they have in finding the Relieving Officer at home, and the uncertainty of obtaining an order."

No. 2198. (*J. Leigh, Esq.*)—"Out of a total of 2,179 deaths in Manchester, 726 had no medical attendance whatever; a very great number are attended by druggists and other unlicensed practitioners."

No. 2245. (*J. Leigh, Esq.*)—"The artisan residing in a town, and the common labourer residing in the country, are placed in very different positions relative to medical relief; Infirmaries and Dispensaries being mostly situated in towns, whereas in country parishes, a long distance from the Doctor, they have great difficulty, first, in getting orders, and then in obtaining the attendance of the medical man."

No. 2246. (*J. Leigh, Esq.*)—"I would empower Medical Men at once to prescribe for, and to attend to the patients applying to them, and give them the means of referring such of their patients as are unable to purchase the medicines to the Dispensary, where they could at once have the prescription prepared."

No. 2465. (*Mr. G. Carter.*)—"A man with 15*s.* a week, with a family of three or four children doing nothing, I do not think I should refuse him a medical note for either his wife or children."

No. 2626. (*G. Wallis, Esq., M.D.*)—"The working classes are estimated by Henry Mayhew at 4,000,000; it is a matter of fact, which, I believe, has been given in evidence before, that you may expect one half of those will be sick every year. If you consider the working classes form the material out of which you make all your paupers, you will see the great importance

of protecting that large class, who are so important to the interests of the country, from pauperism, and letting them remain useful and valuable producers, instead of being a dead weight upon the productive interests of this country; the moment he becomes sick his independence is cut off, it cuts off his power to labour, and by cutting off his power to labour destroys his means of independence; support him, by giving him a little medical aid when necessary, and thus prevent him becoming a pauper."

No. 2647. (*G. Wallis, Esq., M.D.*)—"If a proper system of medical treatment were adopted and checked by a superior Medical Officer, upon the plan of the Army and Navy, the working classes would be in an infinitely better condition, and would not become paupers in the immense masses they do."

No. 2729. (*G. Wallis, Esq., M.D.*)—"I consider the necessity of getting an order from the Relieving Officer to the Medical Officer is a serious detriment to the present system, because it creates such a loss of time. Mr. Charles Buller thought that in medical cases very little ought to be left to the discretion of the Relieving Officer. He ought not to be allowed to be the judge of whether a pauper was sick or not, that was a matter in which he was wholly incompetent to give an opinion, and I perfectly concur with him. I think he possessed almost intuitive knowledge."

No. 3015. (*W. H. Livett, Esq.*)—"The average wages of the poor here are 9*s.* a week."

No. 3016. (*W. H. Livett, Esq.*)—"It is quite impossible with those wages that they should be able to find medical relief, supposing either themselves or any member of their families become sick."

No. 3020. (*W. H. Livett, Esq.*)—"Two thirds of the cases I attend are not paupers before they apply to me; they generally become so afterwards."

No. 3023. (*W. H. Livett, Esq.,*)—"The Relieving Officer considers it his duty to make the order for relief difficult to be obtained."

No. 3024. (*W. H. Livett, Esq.*)—"The Relieving Officer refuses an order in many instances."

No. 3030. (*W. H. Livett, Esq.*)—"I think the intervention of the Relieving Officer is a course which leads to aggravated sickness."

No. 2045. (*H. W. Rumsey, Esq.*)—"I consider it a very serious objection that the sick have to apply for orders for medical relief, it stands in the way of prompt treatment of disease."

No. 2061 and 2062. (*H. W. Rumsey, Esq.*)—"I object to every intervening authority between the sick man and the person appointed to take charge of his health, because in going for an order or ticket the poor may be driven from one source of medical relief to another, and they may find great difficulty in getting an order; precious time is thus being lost in the treatment of disease."

No. 2030. (*H. W. Rumsey, Esq.*)—"If medical relief had been promptly administered in all probability the illness would have been of slight duration, and they would have been in the situation of independent labourers, instead of coming upon the poor rates."

The third request of the Poor Law Medical Officers is—

"*That the scale of extras (including midwifery) shall be extended, and embrace many operations and bad cases in surgery not now paid for; and that the Officer in charge of the Union-house shall participate in this arrangement with the District Officer, and there shall be no discretionary power to give a fixed salary instead of extras.*"

From the returns of 500 district Medical Officers, it appears that 436 have extras, which average 6¾*d.* per case; these, with their salaries of 2*s.* 3*d.* each, make 2*s.* 9¾*d.* per case. The salaries of the 64 whose extras

have been commuted, amount only to 2*s.* 4½*d.* per case, shewing that the commutation has not raised their salaries to the ordinary average. A general feeling exists, that the extras ought to be restored; their removal was, in most instances, effected without the voluntary consent of the Medical Officers; it was forced from them at a time when they were annual officers, and they were given pretty plainly to understand that, if they did not consent, they would not be re-elected. The present scale of extras is far too limited; it should include fractures of all the bones of the body, (excepting the fingers, the toes and the nose,) dislocations of the humerus and femur, and compound dislocations of the wrist and ancle—all serious operations; burns and scalds, involving an attendance of more than one month, and the introduction of the catheter, if required longer than one week. Midwifery should also be paid at the rate of not less than 10*s.* 6*d.* per case, with treble mileage to compensate for the length of time taken up; where the use of instruments is rendered imperative, an extra half-guinea should be given, and in each case where a second opinion is actually necessary, a fee of 10*s.* 6*d.* be paid to the Medical Officer called in, if the patient resides within one mile of his residence; one guinea, if within four miles, and two guineas, if at any greater distance. All consultations, whenever actually necessary, to be paid for extra, the payments being made to the party called in at the same rate as for second opinions in midwifery cases. The surgeon of the Union-house should participate in the arrangement regarding extras, as it is well-known that a Union-house is, as it were, a hospital, many of the chronic and severe cases from the district being sent there for treatment, and requiring a vast quantity of medicine for their cure. It may be argued that he should receive less than the District Officer, as his patients are all congregated in one house, but, to counterbalance this, the cases, from their severity, are longer under treatment, the average duration being thirty-four days, thirteen hours; he has also to examine all paupers on their admission, and is besides the Sanitary Officer of the house.

No. 176. (*R. B. Cane, Esq.*)—"Surgical fees are only paid to District Medical Officers as the Medical Officer of a Workhouse is required to go there almost every day; but if a district Medical Officer has to attend a case of fractured leg, it is necessary for him to make daily and special visits for many weeks, and of course he incurs great additional trouble and expense."

No. 1714 and 1715. (*Dr. J. Griffin.*)—"All Medical Men object to include midwifery in the salaries, on the ground that they would get a great many more orders than when they had a separate payment for each midwifery case."

No. 1718. (*Dr. J. Griffin.*)—"I think doing away with the extras will work prejudicially to the poor."

No. 1725. (*Dr. J. Griffin.*)—"The Medical Men were told that the extras would be compounded for, and asked whether they would accept it; they complained of the arrangement."

No. 1726. (*Dr. J. Griffin.*)—"They consented to the arrangement under protest."

No. 2680. (*G. Wallis, Esq. M.D.*)—"No cases of amputation should be done without a consultation."

No. 2687. (*G. Wallis, Esq., M.D.*)—"I would only pay the Medical Officer when he went out of his own district for the purpose of consultation."

The fourth request of the Medical Officers is—

"*That all Poor Law Medical appointments, whether Union, Parochial, or under Gilbert's Act, not only now in force, but hereafter to be made, shall be declared permanent, subject only to good conduct. The districts, however, to be diminished or increased in extent from time to time, as the Poor Law Board or Public Authorities may think advisable.*"

"The Select Committee of the House of Commons in its third resolution, recommend that every Medical Officer to be appointed after the 25th March, 1855, should continue in office until he may die, resign, or become legally disqualified to hold such office, or be removed therefrom by the Poor Law Board."

The Poor Law Board, in order to carry out the foregoing resolution, issued the following order :—

"Every Medical Officer of a Workhouse, duly qualified according to the regulations of the Poor Law Board in force at the time of such appointment, and every district Medical Officer duly qualified as aforesaid, and residing within the district in which he is appointed to act, shall hold his office until he shall die, or resign, or be proved to be insane by evidence which the Poor Law Board shall deem sufficient, or become legally disqualified to hold such office, or be removed by the Poor Law Board."

In framing the foregoing order, the Poor Law Board no doubt intended to carry out the resolution of the Select Committee for the benefit of the poor, as well as the Union Medical Officers; but, not being conversant with the matter on which they were legislating, it has resulted that, in a vast number of instances (146 out 500 replies, and, no doubt, it is in the same proportion with all) the Officers are not permanently appointed, and are still subject to annual election; if not annually elected the rod is held over them *in terrorem*. It arises this way, medical men generally reside in a town, which forms of itself a district, consequently, only one so residing can be permanent, though perhaps, the adjoining district may not be fifty yards from the Surgeon's residence and his farthest patient not two miles off; in some instances the street, or a river has formed a boundary line of the district, hence the man on the opposite side of the way is not permanently appointed.

If residence constitutes the *sine qua non* for permanency of appointment, why should the Medical Officer of a Workhouse be permanent and not the District Officer, when it is well known that some of the former live further from their patients by miles than the latter? It may be well for the Poor Law Board to say, "some line must be drawn," but I respectfully submit this line should carry with it common sense. Make all Medical Officers permanent, whether resident or not, provided they reside not further than two or three miles from the centre of the district, and encourage the reduction of the size of the latter as much as possible, and do not compel the poor to go from nine to fifteen miles for a Surgeon when they have one living within a short distance of them.

No. 1594. (*Rev. C. Kingsley.*)—"All elections should be permanent, as the profession is exceedingly over-stocked, and very young men try to struggle into a district to get the work out of the hands of the older, and more established and better medical men, and, if they can get hold of midwifery cases, and so introduce themselves amongst the farmers wives and so on, they get a hold and set up in the parish, taking the Union work at a dead loss, simply to get into midwifery practice. I think that any order for Medical Officers to be permanent would put a stop to that bad system of over competition by those young men, which is the case now."

No. 2002 (*Rev. E. J. Howman.*)—"Competition as regards medical relief of the poor is decidedly bad."

No. 2637. (*G. Wallis, Esq., M.D.*)—"An annual election would drive respectable men away from taking any part in it, that they would not be at the trouble of an annual election, and would not have a rod held over them *in terrorem* by Boards of Guardians."

The Poor Law Medical Officers in their sixth request pray—

"*That a revision of salaries take place triennially in each Union, if desired, either by the Poor Law Board, Boards of Guardians, or Medical Officers.*"

The necessity of this must be obvious, as population is fluctuating, and sanitary measures may lessen the amount of sickness; it is moreover just to all parties.

No. 3082. (*H. W. Livett, Esq.*)—"I think if the whole of the salaries were revised and better apportioned to the work which is expected for them, it would tend in a great measure to palliate a great many of the evils which now exist."

The Poor Law Medical Officers in their seventh request pray—

"*That medical orders shall continue in force for each case of sickness no longer than three months, and if renewed be counted as fresh orders.*"

In all cases of illness lasting two months longer than the average duration, it is desirable that the Guardians should inquire into its cause, possibly the case would be better in a Hospital, or the patient may unnecessarily continue on the Medical Officers book in order to obtain additional relief, or if it be really a lingering illness, it is only fair that the Medical Officer should obtain additional payment, which a fresh order would give him; in any case an inquiry would be beneficial.

No. 1879. (*Rev. E. J. Howman.*)—"I believe, in a great measure, the Medical Officer was ordering extra diet in aid of general relief for aged persons, who really wanted additional assistance but had no disease to be cured, it was not curative."

No. 1880. (*Rev. E. J. Howman.*)—"In fact he usurped the office of Relieving Officer."

The Poor Law Medical Officers in their last request pray—

"*That a Medical Man, conversant with Union practice, have a seat at the Poor Law Board, and especial control over the medical department.*"

This I regard as most important to the interests of the poor as well as their Medical Officers, as none but a Medical Man conversant with Union practice can properly carry out duties, which, judging from the returns already made, involve the welfare of at least 1,641,080 patients annually. Had such an officer been appointed years since, the probability is that the medical department of the Poor Law would have been conducted satisfactorily to all parties, and there would not have been that odium attached to the Poor Law Board which now exists. A Medical Head would have pointed out to the Boards of Guardians the necessity of doing justice to their Medical Officers, and would have insisted on them being placed on an equitable footing, in order that they might do their duty by the poor, without injury to themselves.

In Ireland such an officer exists, and why not in England?

No. 560. (*A. Power, Esq.*)—"The Medical Commissioner, in Ireland, is one of the five Poor Law Commissioners; he is, to all intents and purposes, a Poor Law Commissioner, as well as having peculiar duties with reference to the Medical Charities Act."

No. 562. (*A. Power, Esq.*)—"He receives, reads, and gives directions upon the papers arising under the Medical Charities Act."

No. 563. (*A. Power, Esq.*)—"The Poor Law Commissioners in Ireland, are the Board of Health, and papers connected with this subject come more peculiarly under the notice of the Medical Commissioner."

No. 564. (*A. Power, Esq.*)—"The duties of the five Medical Inspectors resemble that of the Poor Law Inspectors, but are confined to the administration of the Medical Charities Act."

No. 588. (*A. Power, Esq.*)—"We obtain great advantage from a Medical Commissioner in the administration of the Medical Charities Act, and the Poor Law also."

No. 1579. (*Rev. C. Kingsley.*)—"There should be some sort of central Medical Authority connected with the Poor Law Board, in the form of a Medical Commissioner, or General Medical Inspector, as there are many cases continually arising which might be much better decided by central Medical authority, than by Boards of Guardians or Poor Law Board itself."

No. 1581. (*Rev. C. Kingsley.*)—"Medical Inspection would be satisfactory to the Medical Officers and the poor."

No. 1701. (*Dr. J. Griffin.*)—"I think if there were a Medical Poor Law Inspector in the character of an Assistant Poor Law Commissioner, to investigate the state of medical relief as it is administered to the poor now, and also the cases of abuses that occasionally are brought before the Boards of Guardians, it would be beneficial to the system in general."

No. 1702. (*Dr. J. Griffin.*)—"I do not think Sub-Inspectors are so necessary as a general Medical Inspector, to investigate cases of neglect brought before Boards of Guardians."

No. 1703. (*Dr. J. Griffin.*)—"One Medical Inspector would have a great deal to do, but now the cases are brought before non-medical Poor Law Assistant Commissioners, who are not so capable of judging as a Medical Poor Law Assistant Commissioner would be, if the cases were brought before him."

No. 3054. (*H. W. Livett, Esq.*)—"I would be content with one Medical Inspector at the Board above, to whom reference might be made in cases of dispute involving medical opinions and medical questions."

SANITARY MEASURES.

The duties of the Poor Law Medical Officers might be made available to improve the sanitary state of the Country. This could easily be accomplished by transferring them from the Poor Law Board to the Board of Health, and making them the Sanitary Officers for their respective districts; there would thus be a ready-made and powerful machinery for the prevention, as well as the cure of the diseases which now afflict the people. These gentlemen, from the nature of their occupation, are conversant with the localities that are productive of disease, and under the direction of a superior Board, would be enabled to insist on their improvement. The Legislature has empowered local Boards to appoint Sanitary Officers, but they have done so in a few instances only, and will not do it unless compelled, but they would not resist a class of men already in existence, having those duties assigned them. The health of a nation constitutes its wealth, it is therefore only fair that it should pay for its preservation, consequently, I would give the Poor Law Medical Officers such salaries from the Consolidated Fund as the Board of Health may from time to time advise. An improved Sanitary Condition of the people would lessen the poor rates materially. The Sanitary Officers already appointed are most of them a very superior class of men, and might either retain their offices, or have that of Medical Inspector offered them, in lieu of their present berths; expense has hitherto deterred local Boards from appointing Sanitary Officers, as they think more of the opinions of the rate payers, whose votes they are afraid of losing at the next annual election, than they do of the health of the community. The state must therefore step in and enact the part of a parent, and pass such laws as will effectually preserve the health of the people at large. The Registrar General informs us that farmers and butchers are a short lived race of men; elect Sanitary Officers throughout the kingdom, and it will soon be known that a dirty farm yard with its stagnant drain, or a filthy slaughter-house, is a fruitful source of disease to the whole neighbourhood, and cannot be permitted. There need be no alteration of the connection of the Medical Officers with the Guardians by whom they might still be elected, and to them make their weekly returns, though in a more simple form, each sheet being ruled to last 13 weeks; the medical orders being entered in a book or separate sheet by themselves. These orders, as they are called, are at present only recommendations, and are frequently disobeyed by the Relieving Officer, which ought not to be sanctioned, as the Medical Officer must be a far better judge of the requirements of the patient than the Relieving Officer can be. The quarterly returns should be forwarded four times a year to the Board of Health, who would thus become acquainted with the locality of particular diseases, and be able to take measures to prevent their recurrence. These returns should be published in the same manner as is

now adopted by the Registrar General in the case of deaths. In a new Bill it would be well to have medical attendance on paupers only charged to the Poor Rate, and the artisan incapable of paying for medical assistance and not in receipt of pauper relief, to the consolidated fund. The power of defining the class of persons entitled to gratuitous medical relief to be left with the Board of Health alone, unless Parliament fix the standard. In the table annexed to the vaccination paper, it will be seen that upwards of 20,000 Children die annually from convulsions (a favorite term for a death that is sudden among children) these cases, and indeed all in which no Medical Man has attended immediately preceding death should be inquired into, and no person so proper to institute this inquiry as the Poor Law Medical Officer of the district. When there is no reason to suspect a death, took place from other than natural causes, he should give a certificate to that effect to the Registrar, if the reverse, to the Coroner for a further investigation. As payment, the Medical Officer should receive half a guinea, with mileage, and enter the case in his weekly return to the Guardians; at present an inquiry is rarely instituted respecting the death of a child, though a preliminary one is now generally adopted by the Coroner, in cases of sudden death in adults, but this would be far more effectually performed by the Poor Law Medical Officer.

No. 2070. (*H. W. Rumsey, Esq.*)—"Under improved sanitary regulations, I believe that a moiety of the population which requires gratuitous medical aid, in some form or other, might be reduced nearly one half, and therefore, I think it is extremely important to prevent the occurrence of sick cases by proper sanitary arrangements, rather than to adopt a system of medical relief which only has reference to the curing of disease."

No. 1578. (*Rev. C. Kingsley.*)—"A Medical Officer knows of nuisances better than any man, and it is he who must tell the Inspector in the long run."

No. 1606. (*Rev. C. Kingsley.*)—"I think in many cases that the poor pay out of their own pocket, for diseases brought upon them by the neglect of others. I have seen many a case of disease which has come on entirely from the bad drainage, or bad building of a cottage. I think the greater part of the disease among our labouring poor is preventable disease."

No. 1612. (*Rev. C. Kingsley.*)—"If perfect sanitary measures were carried out throughout the country, labouring classes, as a body, would be very likely able to pay for their own medical relief, so little disease would there be."

No. 1629. (*Dr. J. Griffin.*)—"I think the present system is working very inefficiently as regards the poor."

No. 2036. (*H. W. Rumsey, Esq.*)—"The duties of the Medical Staff throughout the country ought to be of a sanitary character, and I do not see how the question of public health, and that of public sickness can ultimately be separated. I would, therefore, recommend an addition to the present Board of Health of a Medical Section, with adequate powers of superintending medical relief, dispensaries, and various other matters distinctly medical, which are now either neglected, or but imperfectly managed by the present Board of Health.."

No. 2028. (*H. W. Rumsey, Esq.*)—"That the administration of medical aid be combined with the regulation of the sanitary condition of the labouring population, and be committed to authorities central and local, to be constituted expressly for the management of this department."

No. 2025. (*H. W. Rumsey, Esq.*)—"That the provision of medical aid for the out-door poor be separated from the administration of the Poor Laws, with the reservation of certain powers to the Poor Law Commissioners and the Boards of Guardians."

No. 2029. (*H. W. Rumsey, Esq.*)—"So long as you connect medical relief to the poor with the Poor Law, so long will you continue to maintain an increase of pauperism in the country."

No. 1345. (*M. B. Garrett, Esq.*)—"I think the Medical Officer ought to be removed entirely from the Board of Guardians."

No. 1388. (*Rev. C. Oxenden.*)—"I do not consider the present Poor Law satisfactory as to medical relief."

No. 2072. (*H. W. Rumsey, Esq.*)—"You must open the door to medical relief much wider, and you should have medical inspection, and then you would prevent the sickness which you are now at a great cost in relieving.

No. 2065. (*H. W. Rumsey, Esq.*)—"I do not conceive that the medical and general relief should be submitted to the same principles, they must be administered upon totally different principles, and that it is burdening the Poor Law authorities with a matter which is bringing them into continual difficulties, both with the profession and with the public, and which might be much better managed under a separate and distinct department."

No. 3045. (*H. W. Livett, Esq.*)—"It is not satisfactory to the Medical Officer to be put, as to medical treatment and medical relief, under the control of the Boards of Guardians."

No. 3234. (*C. F. J. Lord, Esq.*)—"If the management and control of Poor Law Medical Attendance was removed from the Poor Law Board and attached to the Board of Health, it would avoid the evil which springs from further centralization, and the difficulty of establishing a fresh Board. My opinion is, that if a comprehensive plan of that kind were carried out, it would conduce more than anything else to the proper regulation of the subject of curative and preventive medicine, and that an efficient mode of medical relief to the sick poor, can be carried out with advantage to the country at large, by such a Board comprehensively acting in state medicine."

VACCINATION.

As vaccination is a part of the duty of the Poor Law Medical Officer, and the subject is likely to be brought before the Legislature next Session, it may be well to consider it in this place. It appears to me to be a matter for grave reflection, whether it might not be desirable to extend the time of vaccination to twelve months before the operation be made compulsory, and thus not only save expense to the nation, but what is of far greater importance, do away with some of the objections to vaccination, to which is attributed by the ignorant many of the diseases of which 100,000 children (one sixth of the whole number born) annually die before they complete their first year. It may be urged that in extending the time, a number of lives may be endangered, but I question very much if this would be the case where the penal clauses enforced, as then the children of a riper age would all be vaccinated, and would not bring the disease from school or play, to their infantile brothers and sisters. In reference to a part of the annexed table, it will be seen that deaths from small pox have diminished since 1852, in which year 1954 succumbed to the disease before the completion of their first year, but in 1853 the deaths were only 861, and in 1854, 569. In extending the time, early vaccination would not be denied those who desired it, but it would enable the poorer classes amongst whom the prejudice against it, and its very early performance principally exists, to postpone it as long as the law would permit. Had cow-pox been called modified small-pox, and people informed that it is small-pox deprived of its virulence by passing through the system of the cow, much of the opposition that has existed against vaccination would long since have passed away.

In 1854, 677,886 children were vaccinated, which is nearly double the number of preceding years, but in 1855 they decreased to 448,519, arising in part from the people discovering that the threatened penalties were not enforced, and the Medical Men finding it did not pay them to lose their time in searching out the un-vaccinated.

VACCINATION TABLE.

	Population.	Births.	Deaths.	Deaths under one year from all causes.	Deaths from one to two years.	Deaths from two to three years.	Births in 649 Unions.	Successful Vaccinations in Unions.	Vaccinations under one year of age.	Vaccinations above one year.	Deaths from small-pox under one year.	Deaths from small pox between one and two years.	Deaths from small pox between two and three years.	Deaths from Convulsions under one year.	Deaths from Convulsions between one and two years.	Deaths from Convulsions between two and three years.	Payments for Vaccinations.
1851	17,927,609	615,865	395,396				592,347	338,947									£ 25,248
1852	18,205,000	624,012	407,135	986,60	33,116	16,211	601,839	397,128			1,954	1,185	834	20,391	2,084	847	25,895
1853	18,402,000	612,391	421,097	97,931	32,927	16,561	601,223	366,593	195,700	170,893	861	453	358	20,506	2,269	813	27,576
1854	18,617,000			99,290	37,751	19,876	623,699	677,886	395,658	282,228	569	389	278	20,066	2,290	910	45,729
1855	18,840,000						623,181	448,519	343,029	105,490							54,727 Expended under the Act.

Of the 18,840,000 inhabitants of this kingdom, it is calculated that 4,000,000 are of the labouring class, whose offspring only, in my opinion, ought to be gratuitously vaccinated, if from these you deduct the deaths of infants, under twelve months old, (and which fall heavier in this class of the community than in any other,) there will not remain more than 100,000 requiring vaccination at the expense of the public; for these, the nation ought to pay such a sum as will slightly remunerate the Medical Man for his labour, which cannot be at less than 2*s.* 6*d.* per case, with mileage. Confine gratuitous vaccination to the labouring classes, and you will confer a boon on the Medical Practitioner, by restoring to him his private patients, of which the Legislature has in many instances deprived him. The rate-payer will also be more satisfied and cease to clamour against compulsory vaccination, which had its origin more in the dread of the expense, than in any real hostility to the measure itself. In an amended Bill, I would attach the compulsory clause rather to the registration of vaccination than to vaccination itself, and simply insist upon all children being registered when vaccinated, and if this registration did not take place before the completion of the 13th month after birth, that a fine of 7*s.* 6*d.* should be inflicted annually, until such registration did take place; the penalties to be recovered in the County Court, by the Registrar, whose duty it should be to sue the parents, or others having the custody of the child for the amount, and to retain it for his trouble. Those who are unable to pay for their children being vaccinated, should be entitled to claim an order for vaccination, from the Relieving Officer, &c., as in cases of ordinary sickness, the expense to be liquidated by the parish. Let a clause be inserted in the Act, that no child shall be admitted into any school, or public establishment of any description, or bound an apprentice, without producing a certificate of registration of vaccination, and in case of death from small pox, let the Registrar refuse a certificate for burial, unless a certificate of registration of vaccination, insusceptibility, or postponement be produced. In default, let a Coroner's inquest be held, and if it should appear that the parents, or others having the custody of an infant, had induced the disease by inoculation by themselves or others, or had wilfully exposed the child to the infection, declare them guilty of manslaughter. Rarely is any difficulty experienced in obtaining the registration of the birth of a child, and still more rare is it that a fine is incurred for non-registration within a given time. Let a similar provision be made in regard to the registration of vaccination, and the like results will follow. Do away with the numerous books, which serve only to harass the Medical Man. Let the Registrar give to the person who registers the birth of a child a paper, as at present, on which should be stated the necessity of registration within a given time, under a penalty of 7*s.* 6*d.* annually until it takes place; and on this paper, there should be forms of certificates for successful vaccination, insusceptibility or postponement. to which the vaccinator has only to append his name, titles and date. It should then be the duty of the parent &c., to take the paper to the Registrar, who would either append his name, and an official stamp to it, or provide him or her with another. In case of loss, provision should be made for a duplicate copy, on payment of a small sum. On removal from the place of birth prior to registration, it should be the duty of the Registrar to transmit a copy to the Registrar of the place of the child's nativity in order that the registry may be complete.

The following correspondence is inserted as an illustratiou of the nature of the complaints of the Union Medical Officers, and the little heed that is taken of them.

Weymouth, 29th Sept., 1855.

My Lords and Gentlemen,

Three months since I addressed a letter to your Honourable Board praying for an increase of salary, and received a reply, dated July 10th, in which was the following paragraph:—"The Board concur with

the Guardians in thinking, that although the number of cases attended by you during the period for which you have held your office, may have been unusually large, it is by no means certain that the duties have permanently increased; the Board can only now add, that if this should be the case, they will give the subject of your salary their further consideration." On the faith of this letter, I have continued to carry on my duties for a second quarter, and regret to say, they have been more onerous than heretofore, as will be seen by a reference to the subjoined list. That they will still further increase during the winter half of the year, I fully believe, as during the past six months we have had fine weather, and consequently, only ordinary cases of sickness. My predecessor attended 642 cases last year, and received for them £110; I have attended 252 cases in the half year and have received only £17 10*s.*: whereas, had I been paid in the same ratio, I should have received £43 1*s.*, or £25 11*s.* more than I have been paid; he had on an average 3*s.* 5*d.* per case, I have only 1*s.* 4¼*d.* It will be seen by a reference to the books that I return weekly on an average, 43 cases, for which I receive 13*s.* 5½*d.*, or 3¾*d.* each, or a half-penny per day per case for attendance, operations, medicines, &c., a sum so grossly inadequate to the duties to be performed, that I must either give my services for nothing, or violate the trust reposed in me by neglecting the poor; the latter, an effectual method to reduce the list of applicants for medical relief, but one that I cannot adopt. I accepted the appointment under the impression that my duties would be no more than my predecessor's, and that the payment would be in proportion to his. In this I have been mistaken, and must therefore respectfully solicit you to reconsider my salary, which can now be done, as none of the medical contracts are signed, and even if they were, I should imagine, by giving a month's notice they could be re-adjusted. I wish not to say aught against my colleagues, who I believe give entire satisfaction to the Guardians and the poor; but it does appear to me most unreasonable, and which nothing can justify now that the duties are ascertained, that one should receive for 25 orders a similar sum to myself who has had 252, or that a second, whose furthest patient resides closer to his house than my nearest one does to mine, should be paid £5 per annum more than myself, particularly when it is considered he has had one fifth less cases. It may appear strange that the number of cases have increased so suddenly, but those residing on the spot, particularly the Relieving Officer, can readily account for it. The truth is, the poor are satisfied with the care that is now taken of them, and, therefore, do not in a general way seek aid of private charity, or the public institutions. I trust I have satisfied your Honourable Board that I am not paid for my labour, and, therefore hope you will direct an enquiry into the subject, and give me a fair remuneration for my services, which I believe are entitled to some consideration at your hands, as during the half year, in addition to my ordinary duties, I have amputated a leg above the knee, removed a large tumour of seven years growth from the chest of a child, and amputated a man's finger near the wrist joint.

Summary of duties performed during the half year, ending September 29th.

No. of orders for patients	353	Draughts	7
Visits at patients' houses	1507	Plaisters	7
Visits by patients at Surgery	481	Confinements	3
Mixtures	902	Amputation of thigh	1
Boxes of pills	277	Removal of large tumour	1
Liniments	44	Amputation of finger near the wrist	1
Lotions	110		
Boxes of ointment	101	Dressing wounds, ulcers, extracting teeth, sticking plaster, lint, and bandages.—No account kept.	
Packets of powders	91		
Blisters	23		

Payment received for the foregoing only £17 10*s.*

I have the honour to be, &c.,

The Poor Law Board. RICHARD GRIFFIN.

12, Royal Terrace, Weymouth,
30th September, 1855.

GENTLEMEN,

I beg to lay before you the accompanying copy of a letter which I forwarded yesterday to the Poor Law Board, (see the preceding letter), they will most probably communicate with you on the subject, should they do so, I most respectfully solicit your aid in support of my views, and if they should not, I trust you will give the subject your earnest consideration, and in conclusion beg to quote the words of Judge Willmore, in a recent trial at Yeovil. "If Medical Officers are screwed down too tight they are placed in a very painful position; either they must be wanting in their duties to the poor, or they must be out of pocket, and one would not like to make a man suffer for his honesty, I am glad, therefore, for anything which promotes a liberal tendency in these matters."

I have the honour to be, &c.,

The Board of Guardians,
Weymouth Union.

RICHARD GRIFFIN.

Poor Law Board, Whitehall, 2nd October, 1855.

SIR,

I am directed by the Poor Law Board to acknowledge the receipt of your letter of the 29th ult., and to inform you that the statement which it contains will meet with their consideration.

I am, Sir, your obedient servant,

Richard Griffin, Esq., Weymouth.

COURTENEY, Secretary.

Weymouth, 13th November, 1855.

MY LORDS AND GENTLEMEN,

I have just received information that the Board of Guardians of the Weymouth Union have again refused to augment my salary, postponing its consideration until next March; this of course will be officially communicated to you. I need scarcely say, the course pursued is so manifestly unjust to me, that I pray your Honourable Board will insist upon justice being at once rendered. I will not now go into details, as my letters of March and September are before you, further than to say the number of fresh orders last week were fourteen, and that in all respects my duties are as laborious as ever, therefore to ask me to work four month's and a half longer, when I have already earned twice as much as my whole year's salary, is positively unjust.

I have the honour to be, &c.,

The Poor Law Board.

RICHARD GRIFFIN.

Poor Law Board, Whitehall,
22nd Nov., 1855.

SIR,

I am directed by the Poor Law Board to acknowledge the receipt of your letter of the 13th instant, respecting your application to the Guardians of Weymouth Union for an increase of your salary as Medical Officer for the Weymouth district. I am directed to inform you that the Board have communicated with the Guardians on the subject, and have received a letter from them, in which they state to the effect, that having considered your application, they see no sufficient grounds for increasing your salary at present, but on the expiration of twelve months from the date of your appointment, they will give the subject their further consideration. Under these circumstances, and looking to the short period for which you have been the Medical Officer for the Weymouth district, the Board must decline to interfere further in the matter.

I am, &c.,

R. Griffin, Esq.

COURTENEY, Secretary.

Mr. Griffin's letter of the 9th of February, 1856, is omitted, as the answer from the Poor Law Board shews the nature of the communication.

Poor Law Board, 14th February 1856.

Sir,

I am directed by the Poor Law Board to inform you that upon the receipt of your letter of the 9th instant, they communicated with the Guardians of the Weymouth Union on the subject of your representations and have received in reply a letter, from which it appears that the Guardians contemplated re-adjusting the Medical districts, and did not, therefore, consider it necessary to enter into any further contract with you as one of the Medical Officers, until they had received an answer to their intended application to this Board.

I am, &c.,

R. Griffin, Esq. COURTENEY, Secretary.

12, Royal Terrace, Weymouth, 6th March, 1856.

My Lords and Gentlemen,

I beg to enclose you the copy of a letter which I laid before the Board of Guardians of the Weymouth Union yesterday, as it is very desirable you should be in possession of every circumstance relative to the proceedings of the Board, in this affair, before giving your decision. Whatever may be the suggestions of the Guardians, I trust, for the sake of the poor, you will not consent to re-unite the districts, or even add two of them together. The division of the town into three districts was made only last year, because, as a whole, it was found to be too large, and worked badly for the poor; to re-unite it would therefore, be most injudicious, though it might provide a by-way to ged rid of an officer who has faithfully discharged his duties to the poor, but who has dared to make public the grievances he labours under. If that part of the parish of Wyke, situated within the Borough, be added to the Weymouth district, and that part of the parish of Radipole within the Borough, to the Melcombe district, and Fleet and Chickerell parishes be taken from a district which already extends fourteen miles across the country, and added to the Wyke district, and the parish of Owermoigne, situated nine miles from the surgeon's residence, be given to a Medical Man who resides within five miles, or to one of the Dorchester men, who are within six miles; the districts would then be as well arranged as the residences of the Medical Men will admit, and you will not displace any of the present officers. With regard to the salaries, let me beg of you to insist that they be made equitable and commensurate with our services.

I have the honour to be, &c.,

The Poor Law Board. R. GRIFFIN.

12, Royal Terrace, Weymouth, March 4, 1856.

Gentlemen,

I have received a letter from the Poor Law Board, stating you contemplate re-adjusting the Medical districts. Permit me respectfully to suggest that mine should not be increased to any great extent, as it is already quite large enough, which will be evident when I tell you that up to the present time I have had 553 medical orders, and by the end of the year the number will probably be 600. I need hardly say these patients constitute a practice of themselves, and at times are as many as a man can, without difficulty, attend in conjunction with a private practice. Situated as your Medical Officers now are, I admit that a slight change would be convenient to those requiring Medical aid, viz. the addition to my district of that part of the Parish of Wyke, included within the Borough, and situated on the south side of the street leading from Rodwell to the Look

Out. By a reference to the medical Books, it will be ascertained how many patients each Medical Officer returns, and I believe it will be found mine are nearly equal to all the others put together. I therefore beg to submit, that in a re-adjustment of the salaries, this circumstance should be borne in mind, and henceforward my salary bear its *just* proportion to the *labour* performed. Hitherto I have received one shilling and two-pence farthing per case, whilst some of my colleagues have had twelve times that amount. The £350 now paid amongst us cannot be considered a sufficient remuneration for our services; I therefore trust you will add to it such further sum as our labour fairly deserves. As a guide for your consideration, allow me to refer you to a copy of a minute of the Poor Law Board, dated 6th June, 1839, and repeated in 1841 (see page 10.) Whatever course you may adopt, I am sure the welfare of the poor will be your first consideration, and this can only permanently be secured by giving a fair remuneration to your Medical Officers, and making the districts so small that they may be efficiently worked. The propriety of the step you took last year in dividing the home district into three, is clearly proved, as the poor do not now, to any extent, seek aid of the private surgeons, with a promise to pay, which they are unable to fulfil, or of a retired practitioner (Mr. Fowler) who says his house is not now besieged, as formerly, or, of the public charities, as is evidenced by a subscriber to the Infirmary, who tells me, this is the first time that he has had Dispensary cards of a previous year still on hand. Subjoined is a list of the work performed by me during the 49 weeks I have held my appointment, the salary for which is only £32 19*s.* 5½*d.*, a sum so ridiculously small, that it cannot be considered in the light of a payment, but rather as a contribution towards the expenses for medicines and dispensing.

I have the honour to be, &c., RICHARD GRIFFIN.

Board of Guardians, Weymouth Union.

Summary of duties performed by me during forty-nine weeks.

No. of orders for patients	553	Liniments	70
Or an average of rather more than eleven fresh orders per week.		Lotions	250
Aggregate weekly return of patients	2545	Boxes of ointment	213
Or a weekly average, within a fraction of fifty-two.		Packets of Powders	200
Visits at patients' houses	4834	Blisters and Plasters	58
Or an average of nearly eight visits to each patient.		Draughts, &c.,	15
Visits by patients at Surgery	915	Confinements	3
Mixtures	2157	Amputation of thigh	1
Or an average of rather less than four for each patient.		Amputation at the metacarpus	1
Boxes of pills	469	Dressing wounds, ulcers, extracting teeth, sticking plaster, lint, bandages, &c.,—No account kept.	

Poor Law Board, 10th March, 1856.

Sir,

I am directed by the Poor Law Board to acknowledge the receipt of your letter of the 6th instant, and to inform you that the statements which it contains, shall meet with their consideration.

I am, &c.,

Richard Griffin, Esq. COURTENEY, Secretary.

12, Royal Terrace, Weymouth, 19th June, 1856.

My Lords and Gentlemen,

I have repeatedly complained to your Hon. Board and the Guardians of the Weymouth Union of the inadequacy of my salary compared with the duties I have to perform. I will not again trouble you with details, further than to say, I commenced the year with 47 patients on my list, and have since had 108 orders, making in the whole 155

patients; for these I shall receive £8 15*s.* or 1*s.* 1½*d.* per case. During the five quarters that I have been the Medical Officer, I have had 687 orders, whilst the Surgeon for the Melcombe district, with 200 orders less, has £5 annually more than myself; and the Surgeon for the Wyke district, with the same salary as myself, and a similar distance from the patients' residences, has had but 56 orders. I need not point out the glaring inconsistency of this disproportionate payment; if my remuneration be sufficient, it is clear that of the other Medical Officers is more than sufficient, and the ratepayers are overcharged. If, on the contrary, the Wyke Officer is but fairly paid, I am most unjustly treated. The Board of Guardians, collectively, have given no reply to any of my letters but the first; in conversation with individual members of the Board, I am informed that they await directions from your Hon. Board on the subject; I trust, therefore, you will at once direct them to award me a fair remunerative salary, as you have the full and absolute power to do, as, I read in the Minutes of Evidence before a Committee of the House of Commons, May 26th, 1854.—*R. B. Cane, Esq.*, (No. 12.)—"The law has confided in the Poor Law Board the absolute power of fixing the amount of salary, irrespectively of the Boards of Guardians, &c."

I have the honour to be &c.,

The Poor Law Board. RICHARD GRIFFIN.

Poor Law Board, Whitehall, 20th June, 1856.

Sir,

I am directed by the Poor Law Board to acknowledge the receipt on the 8th instant, of a memorial signed by yourself and others who were present at a public meeting of Medical and Surgical Practitioners, held at the Free Mason's Hall, London, on the 30th ult., on the subject of the duties and remunerations of Poor Law Medical Officers.

I am directed by the Board to inform you that, that portion of the memorial which relates to the subject of the remuneration at present received by Medical Officers shall receive their consideration. As regards the request that the Board will, "in order to lighten the burden of the arduous duties of Medical Officers, direct the alterations recommended to be made in the form of Weekly Return;" the Board have carefully considered the proposal, but are of opinion that the alterations suggested cannot properly be made, consistently with the due attainment of the objects for which the return is required.

I am, Sir, your obedient servant,

Richard Griffin, Esq. COURTENEY, Secretary.

12, Royal Terrace, Weymouth, July 23rd, 1856.

My Lords and Gentlemen,

I received a letter from your Honourable Board, June 20th, acknowledging the receipt of the memorial signed by one hundred Medical Men; in this letter you say, "as regards the request, that the Board will, in order to lighten the burden of the arduous duties of Medical Officers, direct the alterations recommended to be made in the form of the Weekly Return; the Board have carefully considered the proposal, but are of opinion that the alterations suggested cannot properly be made, consistently with the due attainment of the object for which the Return is required." I have communicated this reply through the medium of the Medical Journals, to all the Union Surgeons, and am not surprised to find it has caused much regret, strengthening as it does, *the belief openly expressed* by many, that the grievances of the Union Medical Officers are little heeded by your Honourable Board.

In this opinion, however, I cannot at present concur, believing the result of your deliberation has been arrived at, by viewing the Amersham weekly return sheet in its present form only, which was not intended by the

memorialists, it being referred to simply as one that prevents the useless labour of re-writing the names weekly, and that any other having the same end, would answer equally well. In quoting the Amersham weekly return sheet, it was thought that no objection could possibly be offered, it having already been stamped by the approval of your Honourable Board for the last twenty years, which of course would not have been the case had it not satisfactorily carried out your policy in that district. I can now only account for its rejection by assuming that it is your determination to lay down a uniform system throughout the kingdom; with this view I venture to submit four forms for your consideration, trusting one of them may be admitted into the extensive reform so much needed, and which we confidently hope you have in contemplation. The weekly re-entry of names is decidedly objectionable for all statistical purposes, and is proved to be a great hardship by the fact that, not only has a memorial on the subject been presented to you by a large meeting of Medical Men, assembled from all parts of the kingdom; but the prayer of it has been reiterated in other memorials from upwards of two hundred Unions, representing the opinions of from one thousand to fifteen hundred of your officers. I need scarcely add, that the addition of any one of the forms now submitted to your notice will be a great saving to the nation, and contribute to the relief of the Union Surgeons; I will not now refer to the other part of the memorial, as I trust before long I shall have the pleasure of hearing from you, that your Honourable Board has decided to enforce a just and uniform system of payment throughout the kingdom as the law has empowered you to do, and thus prevent the necessity of our petitioning Parliament on the subject next session.

I have the honour to be, &c.,

The Poor Law Board. RICHARD GRIFFIN.

12, Royal Terrace, Weymouth, Sept. 26th, 1856.

My Lords and Gentlemen,

I addressed a letter to your Hon. Board on the 23rd July last, enclosing certain forms for an Improved Weekly Return Sheet; to this letter I have not yet received a reply—possibly it may have been overlooked, but should it however not be your intention to adopt any of the Forms, I shall feel obliged by their being returned, as it may probably be necessary to submit them, with other documents to Parliament, after the recess.

I have the honour to be, &c.,

The Poor Law Board. RICHARD GRIFFIN.

Poor Law Board, Whitehall, 1st, Oct., 1856.

Sir,

I am directed by the Poor Law Board to acknowledge the receipt of your letter of the 26th ultimo, and in reference to your letter of the 23rd of July last, to inform you that the Forms which you then transmitted to this Board have not been overlooked by them, but that they wish to retain them for a short time longer, if they should occasion you no inconvenience by doing so.

I am Sir, your obedient Servant,

R. Griffin, Esq. R. N. GREY, Secretary.

12, Royal Terrace, Weymouth, 2nd Oct. 1856.

My Lords and Gentlemen,

I beg to acknowledge the receipt of your letter of the 1st instant, and am happy to hear that the Forms have not been overlooked, and that you wish to retain them a short time longer, which I trust implies there is a chance of one of them being adopted, thus affording a slight relief to the

Union Medical Officers. Their prayer for a uniform and equitable rate of payment throughout the country, I hope will also meet with your favorable consideration. and that there will be no need of their again being compelled to ask the aid of the Legislature to enforce the recommendation of the select Committee of the House of Commons.

I have the honour to be, &c.,

The Poor Law Board. RICHARD GRIFFIN.

12, Royal Terrace, Weymouth, 12th Dec., 1856.

My Lords and Gentlemen,

On the 3rd of January last, I was requested by Mr. Puckett, one of the Weymouth Union Medical Officer, to see a Union patient of his, who had met with an injury eight days previously, and resided at Chickerell, a village three miles distant; the man, aged about forty, I found confined to his bed with a dislocation of the humerus into the axilla, which, from the intense swelling had not been discovered; with the aid of Mr. Puckett, and my son, after twenty minutes great exertion I fortunately succeeded in reducing it, and sent in a bill to the Guardians for one guinea, which they refused to pay.

On the 21st of the same month, I was again sent for by Mr. Puckett, to visit another Union patient of his, who had been in labour many hours, and resided at Osmington, a village four miles distant; though ill at the time, and my proper place the bed, I proceeded without hesitation on a cold wintry afternoon, and in a miserable abode, passed several hours, (and this is the case with many a Union Surgeon, no marvel their days are shortened) I found the child's head impacted with the face presenting, and delivered the woman with instruments of a living child; her dwelling was a mere hovel of a wretched description, and the bed on the floor, which compelled me to assume, and for a considerable time to maintain a stooping position, causing me great personal discomfort, and stiffness in my back and arms for days afterwards. I charged one guinea, which the Guardians refused to pay. I remonstrated with the Clerk of the Board at the unfairness of the treatment, and asked him what I should do in future, saying a patient might die if I refused assistance; his reply was, "that's no business of yours."

On the 3rd of this month I received a note of which the following is the copy:—

Broadway, Dec., 3rd, 1856.

Dear Sir,

I have a case of constipation here, and Mr. Dade giving his authority for further advice and the Relieving Officer stating to me any expense he will see you satisfied.

I remain, Dear Sir, your obedient servant,

R. Griffin, Esq. ADAM S. PUCKETT.

Not forgetting the previous conduct of the Guardians, I, on the impulse of the moment refused to go, but wrote a note to Mr. Puckett recommending certain treatment, not wishing the man to be a sufferer. The messenger, Mr. Puckett's son, earnestly begged me to attend, assuring me the Relieving Officer would pay my fee, and that he had sent for me in consequence of the Rev. Mr. Dade, a magistrate, and the Clergyman of the parish having written to him, insisting upon him getting some other medical man besides Mr. Puckett to see the case, and that he dare not go home without one, that if I would not go he must try and get some one else, but his father would rather have me, at last I reluctantly consented and hired a carriage for the purpose. On meeting Mr. Puckett, I narrated the conversation I had held with his son, to which he replied, "You are sure of your money; White, the Relieving Officer will see you paid," as he said to me, "Cost what it may you must get another Doctor, if it costs £5 I will pay it!" I visited the man who was suffering from constipation, and found he had been properly and actively treated by Mr. Puckett without effect. I therefore had recourse to inflation of the bowels with a pair of

bellows (a plan I had adopted in two other cases with success) and had the pleasure in about fifteen minutes of giving the man relief, as the bowels acted most copiously. The importance attached to the case will be apparent, when I inform your Honourable Board that Mrs. S., a lady of fortune, residing in the parish had sent unknown to the Relieving Officer and Mr. Puckett for her private medical attendant, Dr. Boyd, to see the man, who arrived a short time before me, and we all consulted together on the case. I did not see the Relieving Officer, but sent him by Mr. Puckett a bill for two guineas, a fair charge considering the importance of the case, and that I had to travel into the country on a cold rainy night, and to pay for the hire of a carriage. The Relieving Officer presented the account to the Board last Tuesday and the Guardians refused to pay it. I can therefore only imagine that they have not mental capacity enough to appreciate the value of intellect, that could suggest a simple measure to give immediate and perfect relief, but would probably have better understood the administration of a surfeit of pills, draughts, and clysters, even though the man had died under the treatment, and then possibly they would not have refused payment.

These are cases which prove the absolute necessity of removing all control of Medical Officers from Boards of Guardians, whom one would almost suspect of thinking more of their own pockets and those of the ratepayers than the lives of the poor entrusted to their care. I should have submitted the first two cases to your Honourable Board some months since, but did not wish my private complaints to interfere with that of the more important one, the memorial of the Union Medical Officers in general, which I was in hopes was under the consideration of your Honourable Board, but from the length of time that has elapsed since its presentation, I fear it is from the Legislature only we can hope for any general and comprehensive measure of reform. The President, Mr. Bouverie, will perhaps recollect my narrating the cases to him, though not officially, when I presented the general memorial of the Poor Law Medical Officers on the 31st of May last. The time has at length arrived for me to call upon your Honourable Board to decide whether I am to be paid or not, as the Law gives you absolute power to do. To delay longer might endanger the lives of the poor in this locality, as it cannot be expected I should continue to sacrifice time and health without remuneration. After the several representations made by me to the Guardians and your Honourable Board of the inadequacy of my payment, and the gross injustice of my receiving on an average only 1*s.* 2½*d.* per case, whilst one of my colleagues has 2*s.* 0¼*d.* and a third 14*s.* for performing precisely similar services to mine; I should have imagined, that although justice was denied me in the one case, the Guardians would, as a small compensation, have gladly rewarded me with liberality for any extra work I might perform; but no, it is the reverse, and the Weymouth Union will have the unenviable notoriety of being one of the most unjust and illiberal in the kingdom.

I have the honour to be, &c.,

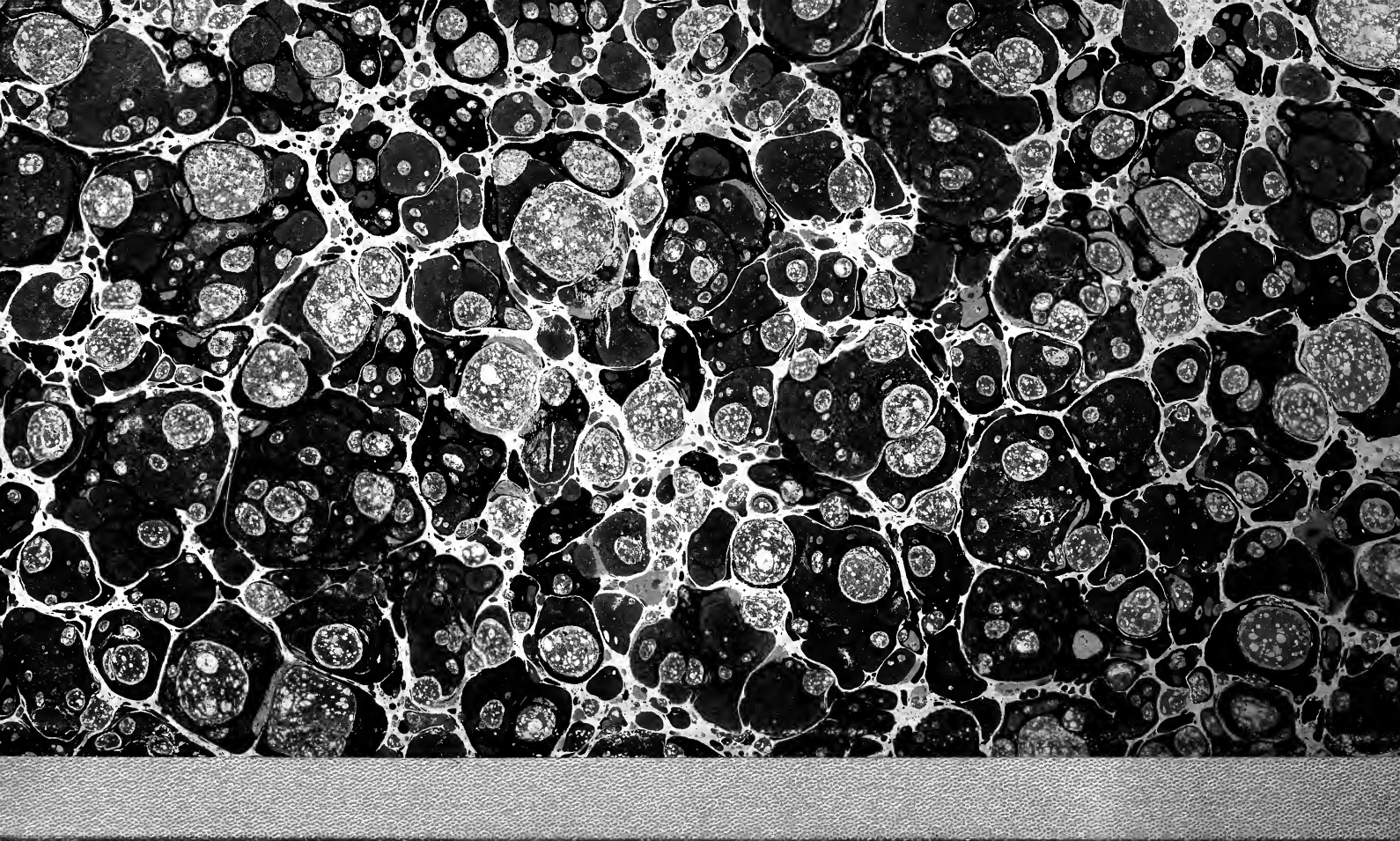
The Poor Law Board. RICHARD GRIFFIN.

Poor Law Board, 18th Dec., 1856.

Sir,

I am directed by the Poor Law Board to acknowledge the receipt of your letter of the 12th instant, and to inform you that the subject to which it relates will receive their attention.

I am, Sir, &c.,

Richard Griffin, Esq. W. G. LUMLEY, Assistant Secretary.

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